U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Fo approved
Office Management
a Budget
No 215-0188
Expi s 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 (440.

	LY BEFORE PREPARING THIS REPORT.	
E QUASTING!		
1. File Number U-	2. Fiscal Year Covered From:	
	1 / 2004 Through: 2 / 37 /	904
3. Name and address of person filing.	Name, file number, and address of labor organization.	****
Name LAMES Q KATOLA	Name PACE LOCAL UNION 7-0470	
· · · · · · · · · · · · · · · · · · ·	Labor Organization File Number	· i
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 2/4/17/457	Street 17(37) MORRIS THOMAS ROALS	
Chy C. 2. 494.87	City CLOQUET	
State 72772 ZIP Code + 4 ZS 72 3	State // N ZIP Code +4 5	720
5. Position in labor organization.		
Enter appropriate data below if, during the peat flecal year, you or your spot (except as specified in the exclu	use or minor child directly or indirectly had any of the following interestations set forth in the instructions):	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizable		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, If any:		
P.O. Box, Bidg., Room No., if arry	7.b. Amount.	
Street		
City		
State ZIP Code + 4		
Signa	iture	
15. Signature and vertilication. The undersigned declares, under penalty of F submitted in this report (including the information contained in any accompany) undersigned's knowledge and belief, true, correct, and complete. (See the second complete.)	ng documents), has been examined by the signetory and is, to the best of	the
Signed Carry State	On Z-Z-2-9-5 Date Telephone Number	

B. Held an interrect in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from a selling or lessing by, or otherwise dealing with the business (2) any part of which consists of buying from or selling or lessing lined by an officery or officery to an officery or officery or or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). Name 7 rade Name, if any: D. D. Box, Bidg., Room No., if any 2 IP Code + 4 10. If 8.b. or 9.c. is chacked give trust or employer's name. Name 7 rade Name, if any: P.O. Box, Bidg., Room No., if any Street 11.b. Approximate obtain value of such dealing. 12.b. Nature of interest held or income received. 12.b. Amount. 12.b. Amount. 12.b. Amount. 13.b. Nature of Employer or Labor Relations Consultant (including treate name, any payment of money or other thing of value.	sists of buying from, selling or leasing to, or otherwise dealing with the business years your labor organization represents or its actively seeking to represent, or actively selling to represent or its actively seeking to represent or its active
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